

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2013 MAY 23 AM 8: 52

(Instructions on back of application)

The name of the limited liability IF SIGNS, LLC	company is:	SECRETARI OF STATE STATE OF IDAHO
2. The complete street and mailing 1255 E 17th Street, Idaho Falls, ID 83	addresses of the initial desi	gnated office:
(Street Address)		
(Mailing Address, if different than street address	s)	
3. The name and complete street a	ddress of the registered age	ent:
Travis Johnson	1820 E 17th Street, Idaho F	Falls, ID 83404
(Name)	(Street Address)	
The name and address of at least company:	t one member or manager o	of the limited liability
Name Travis Johnson	Circ <u>Address</u> 7200 S Culebra Rio Cirlee , Idaho Falls, ID 83406	
Darby Smith	10 N 3900 E, Rigby, ID 83442	
5. Mailing address for future corresp 1255 E 17th Street, Idaho Falls, ID 83	oondence (annual report not 404	ices):
6. Future effective date of filing (opti	onal):	
Signature of a manager, member person.	or authorized	
Signature		Secretary of State use only
Typed Name: Travis Johnson		
Signature		IDAHO SECRETARY OF STATE 05/23/2013 05:00
Typed Name: Darby Smith		CK: 21067 CT: 126526 BH: 1375071

W125601

9/21/2012